

Fill in this information to identify the case:

Debtor name ATHEN'S INC.

United States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets—Real and Personal Property (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G)
- Schedule H: Codebtors (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals (Official Form 206Sum)
- Amended Schedule
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders (Official Form 204)
- Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct. 

Executed on 4/26/23

X

Signature of individual signing on behalf of debtor

ANTHONY DOBBS

Printed name

PRESIDENT

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name ATHEN'S INC.United States Bankruptcy Court for the: DISTRICT OF NEVADA

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Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

1a. Real property: Copy line 88 from Schedule A/B.....	\$ <u>0.00</u>
1b. Total personal property: Copy line 91A from Schedule A/B.....	\$ <u>122,170.50</u>
1c. Total of all property: Copy line 92 from Schedule A/B.....	\$ <u>122,170.50</u>

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of Schedule D..... \$ 240,000.00

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims: Copy the total claims from Part 1 from line 5a of Schedule E/F.....	\$ <u>26,657.13</u>
3b. Total amount of claims of nonpriority amount of unsecured claims: Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....	+\$ <u>3,262,255.63</u>

4. Total liabilities..... Lines 2 + 3a + 3b

\$ <u>3,528,912.76</u>

Fill in this information to identify the case:

Debtor name ATHEN'S INC.United States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

 Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on Schedule G: Executory Contracts and Unexpired Leases (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

 No. Go to Part 2. Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor			Current value of debtor's interest
3. Checking, savings, money market, or financial brokerage accounts (Identify all)	Name of institution (bank or brokerage firm)	Type of account	Last 4 digits of account number
3.1. <u>Bluevine</u>		<u>1851</u>	<u>\$3,807.93</u>

3.2. <u>US Bank</u>	<u>5728</u>	<u>\$153.53</u>
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4. Other cash equivalents (Identify all)

5. Total of Part 1.

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$3,961.46**Part 2: Deposits and Prepayments**

6. Does the debtor have any deposits or prepayments?

 No. Go to Part 3. Yes Fill in the information below.**Part 3: Accounts receivable**

10. Does the debtor have any accounts receivable?

 No. Go to Part 4. Yes Fill in the information below.

Debtor ATHEN'S INC.
Name

Case number (If known) _____

Part 4: Investments**13. Does the debtor own any investments?**

No. Go to Part 5.
 Yes Fill in the information below.

		Valuation method used for current value	Current value of debtor's interest
14.	Mutual funds or publicly traded stocks not included in Part 1 Name of fund or stock:		
14.1.	Note owned by New Charters Nevada, Inc.		\$40,000.00
15.	Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture Name of entity:	% of ownership	
16.	Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1 Describe:		
17.	Total of Part 4. Add lines 14 through 16. Copy the total to line 83.		\$40,000.00

Part 5: Inventory, excluding agriculture assets**18. Does the debtor own any inventory (excluding agriculture assets)?**

No. Go to Part 6.
 Yes Fill in the information below.

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

No. Go to Part 7.
 Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles**38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

No. Go to Part 8.
 Yes Fill in the information below.

Part 8: Machinery, equipment, and vehicles**46. Does the debtor own or lease any machinery, equipment, or vehicles?**

No. Go to Part 9.
 Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1.	2017 MERCEDES BENZ 3500 SPRINTER 15 PASSENGER BUS VIN Ending #8953	\$18,500.00		\$18,500.00

Debtor	<u>ATHEN'S INC.</u> Name	Case number (<i>If known</i>)	
47.2.	2017 MERCEDES BENZ 3500 SPRINTER 15 PASSENGER BUS VIN Ending #9258	\$18,500.00	\$18,500.00
47.3.	2019 MERCEDES BENZ 2500 SPRINTER 15 PASSENGER BUS VIN Ending #0940	\$14,000.00	\$14,000.00
47.4.	2019 MERCEDES BENZ METRIS VAN VIN Ending #4583	\$19,000.00	\$19,000.00
48.	Watercraft, trailers, motors, and related accessories <i>Examples:</i> Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels		
49.	Aircraft and accessories		
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment) <u>Machinery & Equipment</u>	\$0.00	\$8,209.04
51.	Total of Part 8. Add lines 47 through 50. Copy the total to line 87.	\$78,209.04	
52.	Is a depreciation schedule available for any of the property listed in Part 8? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes		
53.	Has any of the property listed in Part 8 been appraised by a professional within the last year? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
Part 9: Real property			
54.	Does the debtor own or lease any real property? <input checked="" type="checkbox"/> No. Go to Part 10. <input type="checkbox"/> Yes Fill in the information below.		
Part 10: Intangibles and intellectual property			
59.	Does the debtor have any interests in intangibles or intellectual property? <input checked="" type="checkbox"/> No. Go to Part 11. <input type="checkbox"/> Yes Fill in the information below.		
Part 11: All other assets			
70.	Does the debtor own any other assets that have not yet been reported on this form? Include all interests in executory contracts and unexpired leases not previously reported on this form. <input checked="" type="checkbox"/> No. Go to Part 12. <input type="checkbox"/> Yes Fill in the information below.		

Debtor ATHEN'S INC.
Name _____

Case number (if known) _____

Part 12: **Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	\$3,961.46	
81. Deposits and prepayments. <i>Copy line 9, Part 2</i>	\$0.00	
82. Accounts receivable. <i>Copy line 12, Part 3</i>	\$0.00	
83. Investments. <i>Copy line 17, Part 4</i>	\$40,000.00	
84. Inventory. <i>Copy line 23, Part 5</i>	\$0.00	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6</i>	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7</i>	\$0.00	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8</i>	\$78,209.04	
88. Real property. <i>Copy line 56, Part 9</i>>		\$0.00
89. Intangibles and intellectual property. <i>Copy line 66, Part 10</i>	\$0.00	
90. All other assets. <i>Copy line 78, Part 11</i>	\$0.00	
91. Total. Add lines 80 through 90 for each column	\$122,170.50	+ 91b. \$0.00
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		\$122,170.50

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United States Bankruptcy Court for the: DISTRICT OF NEVADA

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Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.

Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A	Column B
Amount of claim	Value of collateral that supports this claim
Do not deduct the value of collateral.	
\$170,000.00	Unknown

2.1	<p>Marlin Business Bank Creditor's Name</p> <p>300 Fellowship Rd Mt. Mount Laurel, NJ 08054 Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.</p>	<p>Describe debtor's property that is subject to a lien</p> <p>Describe the lien</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p>
2.2	<p>Mercedes FinancialServices USA LLC Creditor's Name</p> <p>PO Box 5260 Carol Stream, IL 60197 Creditor's mailing address</p> <p>Creditor's email address, if known</p> <p>Date debt was incurred</p> <p>Last 4 digits of account number</p> <p>Do multiple creditors have an interest in the same property? <input type="checkbox"/> Yes</p>	<p>Describe debtor's property that is subject to a lien</p> <p>Describe the lien</p> <p>Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out Schedule H: Codebtors (Official Form 206H)</p> <p>As of the petition filing date, the claim is: Check all that apply</p>

Debtor	ATHEN'S INC.	Case number (if known)
Name		
<input checked="" type="checkbox"/> No <input type="checkbox"/> Contingent <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority. <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		

3. Total of the dollar amounts from Part 1, Column A, Including the amounts from the Additional Page, if any. **\$240,000.00**

Part 2: List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did
you enter the related creditor?

Last 4 digits of
account number for
this entity

Fill in this information to identify the case:

Debtor name ATHEN'S INC.United States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

 Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

 No. Go to Part 2. Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

		Total claim	Priority amount
2.1	Priority creditor's name and mailing address Internal Revenue Service PO Box 9941 Stop 6552 Ogden, UT 84409-0941	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$26,657.13 \$26,657.13
	Date or dates debt was incurred	Basis for the claim:	
	Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim	
3.1	Nonpriority creditor's name and mailing address First Source Bank PO Box 783 South Bend, IN 46624	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$758,241.62
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.2	Nonpriority creditor's name and mailing address M&T Capital and Leasing 225 Asylum St 20th Floor Hartford, CT 06103	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed	\$336,924.67
	Date(s) debt was incurred _____	Basis for the claim: _____	
	Last 4 digits of account number _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	ATHEN'S INC. Name	Case number (if known)	
3.3	<p>Nonpriority creditor's name and mailing address Marlin Business Bank 300 Fellowship Rd Mt. Mount Laurel, NJ 08054</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$170,000.00
3.4	<p>Nonpriority creditor's name and mailing address Mercedes Financial PO Box 5260 Carol Stream, IL 60197</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	Unknown
3.5	<p>Nonpriority creditor's name and mailing address Motor Coach Tire Sales, LLC 1133 4th St Columbus, GA 31901</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$6,143.62
3.6	<p>Nonpriority creditor's name and mailing address Motors Management 3701 Alabama Ave S Minneapolis, MN 55416-5156</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$187,920.00
3.7	<p>Nonpriority creditor's name and mailing address NNV Diesel Repair 3117 Wexford Hill Ct. North Las Vegas, NV 89031</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$156,732.00
3.8	<p>Nonpriority creditor's name and mailing address Omnitracs PO Box 847170 Dallas, TX 75284-7170</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$15,044.01
3.9	<p>Nonpriority creditor's name and mailing address People's Capital & Leasing 850 Main Street Bridgeport, CT 06604</p> <p>Date(s) debt was incurred _____</p> <p>Last 4 digits of account number _____</p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent</p> <p><input checked="" type="checkbox"/> Unliquidated</p> <p><input type="checkbox"/> Disputed</p> <p>Basis for the claim: _____</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$336,924.67

Debtor	ATHEN'S INC. Name	Case number (if known)	
3.10	Nonpriority creditor's name and mailing address PGT Technologies 5535 Memorial Dr., Suite F-451 Houston, TX 77007 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$3,975.51
3.11	Nonpriority creditor's name and mailing address River City Petroleum Inc 3775 N. Freeway Blvd., # 101 Sacramento, CA 95834 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input checked="" type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$32,049.53
3.12	Nonpriority creditor's name and mailing address Small Business Adminstration 1545 Hawkins Blvd., Suite 202 El Paso, TX 79925 Date(s) debt was incurred _____ Last 4 digits of account number <u>7900</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,258,300.00

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
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Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1

5b. Total claims from Part 2

5c. Total of Parts 1 and 2

Lines 5a + 5b = 5c.

Total of claim amounts	
5a. \$	26,657.13
5b. + \$	3,262,255.63
5c. \$	3,288,912.76

Fill in this information to identify the case:

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 Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

 No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form. Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Alvarado Investments LLC
2102 Bridal Wreath Lane
Las Vegas, NV 89156

2.2. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Capital Premium Insurance
12235 South 800 East
Draper, UT 84020

2.3. State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Samsara
1 De Haro Street
San Francisco, CA 94107

Fill in this information to identify the case:

Debtor name ATHEN'S INC.United States Bankruptcy Court for the: DISTRICT OF NEVADA

Case number (if known) _____

 Check if this is an amended filing

Official Form 206H

Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

	Name	Mailing Address	Name	Check all schedules that apply:
2.1	GRAND CANYON DESTINATIONS, LLC; Anthony Dobbs	8020 S. Rainbow Blvd., Suite 100-458 Las Vegas, NV 89139	First Source Bank	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.1</u> <input type="checkbox"/> G _____
2.2	GRAND CANYON DESTINATIONS, LLC; Anthony Dobbs	8020 S. Rainbow Blvd., Suite 100-458 Las Vegas, NV 89139	People's Capital & Leasing	<input type="checkbox"/> D _____ <input checked="" type="checkbox"/> E/F <u>3.8</u> <input type="checkbox"/> G _____